

POTENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

EPA

REGION

6

SITE NUMBER

LA 365A

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME Chandler Battery Pit	B. STREET Canby Rd 15 ^{mi} N. of I-20	
C. CITY Ruston	D. STATE LA	E. ZIP CODE 71270

II. TENTATIVE DISPOSITION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK 'X'	ACTION AGENCY			
		EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED -- NO HAZARD					
B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.)		X			
C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.)					X
D. ENFORCEMENT ACTION NEEDED (if yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)			X		

E. RATIONALE FOR DISPOSITION

Site is an active natural gas station that contains an inactive disposal pit. Pit was used as a blow-off site for a natural gas compressor and currently contains an oily, milky liquid. A diked area also contains this same liquid. Chevron USA, Inc. currently has plans to close the inactive portions of the facility, but does not include the diked area. They plan to submit closure plan to LA Office of Conservation. Local water wells are source of drinking water for area. Further investigation is recommended to define possible drinking water contamination and of local environment.

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION

(mo., day, & yr.)

G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE

ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME G. W. Guerra	6AW-SC	2. TELEPHONE NUMBER 214 767-4075	3. DATE (mo., day, & yr.) 02 MAY 85
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III. INVESTIGATIVE ACTIVITY NEEDED Recently received

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

- ① Obtain copy of closure plan for facility - what types of sampling (if any) is involved?
- ② Determine State and/or private party's plans to sample local drinking water wells.
- Implement an on-scene sampling plan if no further action is planned by State or company → provide hydrogeological data w/ respect to facility.

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO.	2. SCHEDULED DATE OF ACTION (mo, day, & yr)	3. TO BE PERFORMED BY (EPA, Contractor, State, etc.)	4. ESTIMATED MANHOURS	5. REMARKS
a. TYPE OF SITE INSPECTION				
(1) Sampling	1985	FIT		Coordinate w/ 6W-SP to define locations of drinking water wells in vicinity.
(2)				
(3)				
b. TYPE OF MONITORING				
(1)		Review		'closure Plan' first.
(2)				minimum:
c. TYPE OF SAMPLING				
(1) Drinking Water Wells	1985	FIT		① Upgradient; ① downgradient
(2) Soil	1985	FIT		in/around diked area

III. INVESTIGATIVE ACTIVITY AS NEEDED and PART B - PROPOSED INVESTIGATIVE ACTIVITY (Continued)

d. TYPE OF LAB ANALYSIS				
(1)				
(2)				
e. OTHER (specify)				
(1)				
(2)				

C. ELABORATE ON ANY OF THE INFORMATION PROVIDED IN PART B (on front & above) AS NEEDED TO IDENTIFY ADDITIONAL INVESTIGATIVE WORK.

D. ESTIMATED MANHOURS BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES	1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES
a. EPA		b. STATE	
c. EPA CONTRACTOR		d. OTHER (specify)	

IV. REMEDIAL ACTIONS

A. SHORT TERM/EMERGENCY STRATEGY (On Site & Off-Site): List all emergency actions needed to bring site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the space below.

1. ACTION	2. EST. START DATE (mo, day, & yr)	3. EST. END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. ESTIMATED COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

B. LONG TERM STRATEGY (On Site & Off-Site): List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. EST. START DATE (mo, day, & yr)	3. EST. END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. ESTIMATED COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

C. ESTIMATED MANHOURS AND COST BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES	1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES
a. EPA			b. STATE		
c. PRIVATE PARTIES			d. OTHER (specify)		